

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AD</i>	<i>70591</i>	<i>3/4/98</i>
O.I.P.E. CLASSIFIER	<i>AD</i>	<i>089971</i>	<i>03/09/98</i>
FORMALITY REVIEW	<i>AD</i>	<i>089971</i>	<i>4/00/98</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
11	✓	✓	✓
12	✓	✓	✓
13	✓	✓	✓
14	✓	✓	✓
15	✓	✓	✓
16	✓	✓	✓
17	✓	✓	✓
18	✓	✓	✓
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26	✓	✓	✓
27	✓	✓	✓
28	✓	✓	✓
29	✓	✓	✓
30	✓	✓	✓
31	✓	✓	✓
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48	✓	✓	✓
49	✓	✓	✓
50	✓	✓	✓

Claim	Final	Original	Date
51	✓	✓	✓
52	✓	✓	✓
53	✓	✓	✓
54	✓	✓	✓
55	✓	✓	✓
56	✓	✓	✓
57	✓	✓	✓
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96	✓	✓	✓
97	✓	✓	✓
98	✓	✓	✓
99	✓	✓	✓
100	✓	✓	✓

Claim	Final	Original	Date
101	✓	✓	✓
102	✓	✓	✓
103	✓	✓	✓
104	✓	✓	✓
105	✓	✓	✓
106	✓	✓	✓
107	✓	✓	✓
108	✓	✓	✓
109	✓	✓	✓
110	✓	✓	✓
111	✓	✓	✓
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127	✓	✓	✓
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130	✓	✓	✓
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140	✓	✓	✓
141	✓	✓	✓
142	✓	✓	✓
143	✓	✓	✓
144	✓	✓	✓
145	✓	✓	✓
146	✓	✓	✓
147	✓	✓	✓
148	✓	✓	✓
149	✓	✓	✓
150	✓	✓	✓

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)